#### EFRC DISPOSITION WORKSHEET

Re:

IV 2505884 / 2483294

Subject:

Edgar Cuevas #

Investigator:

Sgt. Henry Ortega, Internal Affairs Bureau

Advocate:

Sgt. Nikio Caffery, Advocate

#### **DISPOSITION OF CHARGES**

The following charges were prepared by the Advocacy Unit. Please indicate your disposition of the potential charges, and put any additional sustained charges (with reference to the investigation) on attached sheet(s).

### Potential Charge(s):

The evidence in this investigation supports the following charges:

- 1. That in violation of Manual of Policy and Procedures Section 3-01/030.10 Obedience to Laws, Regulations and Orders, as it pertains to 3-10/050.15 Performance to Standards Performance Associated with the Use of Force; and/or 3-10/150.00, Tactical Incidents; and/or 5-09/220.50, Foot Pursuits, on or about May 12, 2019, while on-duty and assigned to Compton Station, Subject Cuevas, failed to perform to the standards established for his rank of Deputy Sheriff, and/or failed to perform his duties in a manner which established and maintained the highest standard of efficiency in carrying out the functions and objectives of the Department, when he took independent action and/or used strategies and/or tactics which failed to comply with Department policies, and/or procedures, and/or training, as evidenced by, but not limited to:
  - failing to broadcast radio traffic of required information via a dispatch frequency with the Sheriff's Communication Center upon initiation of the pursuit; and/or,
  - failing to communicate, via radio, to his partners he was about to approach and/or he was about to detain Suspect Blas; and/or,
  - failing to coordinate with additional units in establishing and/or maintaining a containment for Suspect Blas; and/or;
  - failing to formulate with additional units a tactical plan prior to approaching and/or contacting Suspect Blas; and/or,
  - e. approaching, and/or closing the distance between himself and Suspect Blas, without an exigency and/or emergency and/or additional units.

Evidence Reference:	
Defenses/Conflicting Evidence:	
Disposition:	
XCharge founded as delineatedCharge founded as modifiedCharge unresolvedCharge unfounded	
Discipline Assessment	
Review of Applicable Guidelines for discipline Section	ion:
The Department's "Guidelines for Discipline" (September Analogous misconduct with associated disciplinary penalogous	
Conduct	Standard Discipline
Obedience to Laws, Regulations and Orders     Performance to Standards - Performance     Associated with the Use of Force     Tactical Incidents	W/R to Discharge

Foot Pursuits

### **Determination of Discipline:**

Based upon the attached assessment of mitigating and aggravating factors, the following discipline has been determined to be appropriate. This discipline is subject to revision upon receipt of the subject's response of grievance.

	Discharge
	Reduction in Rank
Х	Suspension with loss of pay and benefits for <u>3</u> days Written Reprimand
	No discipline

### Assessment of Mitigating and Aggravating Factors:

The following describe the mitigating and aggravating factors in the determining the discipline in this investigation. Those factors include:

Intent Truthfulness

Past Performance Severity of Infraction

Degree of Culpability Acceptance of Responsibility

Disciplinary History Other Factors

Management has considered the subject's performance, which is documented in the Subject's Department personnel file, and those documents not contained in that file which are attached to the disposition worksheet.

# Los Angeles County Sheriff's Department Officer Involved Shooting

								age	1 01 0
Report Date: 02/13/202	0 Bureau/Statio	n/Facility: tral Pati	rol Division / Con	npton S	Station	Adm	in. Invest.?		Hit?
			Incident Informa	tion					
URN: 019	9-07068-2825-055		Date:	05/12/	2019		Time:	1817	nours
City or Station:	Compton		Nature of Incident:						
Location:	Compton		A foot pursuit e						
	eet, Compton 90221		potentially arm pointed a firear						
Location Type (check one or more):   Backyard  Beach  Business  Fraeway  Industrial  Park  Parking Lot  Residence  Rural  School	Lighting (check only on Darkness  Darkness  Daylight Other Street Lights  Weather (circle only or Clear Cloudy Fog Rain		Incident Type (check Accidental  Accidental  Amed Person Fleeing Suspect Foot Pursuit Gun Take Away Moving Vehicle Sniper/Ambush Startle Struggle Involved Traffic Stop Unarmed Person		iare):	Arrest Call Obser One P Other Searc Two P Prior Activ	herson Unit h Warrant herson Unit hity (check on		
Street	Distance:		Vehicle Pursuit			Other			
Other:	10 feet		Warrant Service			✓ Routin	e Patrol		
Total # of Shots Fired by De 3	Total # of Shots Fired by  0	Suspect	Warning Shot Other:			Aero (	init?	Canina	Unit?
Sanda de la Caracteria de	A Carterina dia	of the Sugar	Employee Witnes	ses	Villa Self & Salgari	Haller and S	and in the second	alider Ste	23.246BC
Employee #	ast Name	First	Name	M.I.	ShiftTime (ch	eck only one):	ShiftType (c	heck only	one):
Employee #	Calderon	Circl	Joge	A.	EM /	PM Day		_	e Off Duty
Empression	Hernandez	1 11 44	Christopher	B.		PM Day	Regular	Overtin	ne Off Duty
Employee # L	ast Name Anaya	First	Name Guillermo	M.I. A.	ShiftTime (ch		ShiftType (d ✓ Regular		
	The state of the s	No	n-Employee Witn	esses		and the second and the			
Last Name	5500			First I	eme		265	MJ	
Street Address		City		Zip C	odo	Work Ph	h	ema Dh	
Last Name				First !	Name			M,I	
Street Address		City		Zip C	nde 1	Nork Ph	la la	ome Ph	
Last Name				First I	Name			M,I	
Street Address		City		Zip.C	ode	Work Ph	Н	ome Ph	
pF;4499/00/19998/19998/19998	Shared Market Market No.		Was to a state of the	- 8		_	. 326		
2005	Haustin Commence of State Control of the State Cont	The Aller	Supervisors	1.5875	The backers (The			September 1	da an da
Employee # Last Nar	Butler	First Na	Natasha	M.I. K.	On Duty		-		o shooting
Employee # Last Nar	me	First N	ame	M.L	(check one	or more):	Minia II	1701100	T. Silo Gining
	Johnson		Eric		On Duty	during shoo			o shooting in shooting
			Watch Sergear						
Employee # La	st Name	141		F	irst Name	-			M.I.
		Kluth				Dav	IO		A.
	SEAS OF THE SECTION		Watch Command		Sept. 1980 1981	* * (5:349)			ANNERS DE
Employee # La	st Name			F	irst Name	-			M.I.
		Veloz				Osc	ar		E.

Service.	PSTD Use City	
SH #		
SH#	14 mg	

## SUPPLEMENTAL EMPLOYEE WITNESSES Los Angeles County Sheriff's Department

Page 2 of 6

Strategies and Strategies and Company	itnesses				
ast Name	Walker (#	First Name	Latosha	M.I.	S.
treet Address	301 S. Willowbrook Avenue, Compton	Zip Code 90220	Work Ph (310) 605-6500	Home Ph	
ast Name	Hubbard (#	First Name	James	M.I.	F
freet Address	301 S. Willowbrook Avenue, Compton	Zip Code 90220	Work Ph (310) 605-6500	Hame Ph	
ast Name	Butler (#	First Name	Natasha	М.Т.	
reet Address	301 S. Willowbrook Avenue, Compton	Zip Code 90220	Work Ph (310) 605-6500	Home Ph	
ast Name	Johnson (#	First Name	Eric	M.I.	
treet Address	301 S. Willowbrook Avenue, Compton	Zip Code 90220	Work Ph (310) 605-6500	Home Ph	
ast Name	Juarez (#	First Name	Jaime	M,L	-
treet Address	301 S. Willowbrook Avenue, Compton	Zip Code 90220	Work Ph (310) 605-6500	Home Ph	
ast Name		First Name		M.I.	
Street Address		Zip Code	Work Ph	Home Ph	· ( ) · · · · · ·
asi Name		First Name		M.I.	
treet Address	and the state of t	Zip Code	Work Ph	Home Ph	
ast Name	element of the control of the contro	First Name		M.I.	
treat Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		M,1,	
freet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		M.I.	
treet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name	7000	M.I.	
ireet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		M.I.	
treet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		M.L.	
Street Address		Zip Code	Work Ph	Home Ph	
asl Name	100 m	First Name		M.I.	
freet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		M.I.	
treet Address		Zip Code	Work Ph	Home Ph	
ast Name		First Name		М.І.	
treet Address	And the state of t	Zip Code	Work Ph	Home Ph	

# SUPPLEMENTAL NON-EMPLOYEE WITNESSES Los Angeles County Sheriff's Department

Page 3 of 6

	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name	y-, :	М.І.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.J.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.1.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Street Address	Zip Code	Work Ph	Home Ph
Last Name	First Name		M.I.
Last Name Street Address	Zip Code	Work Ph	M.I. Home Ph
		Work Ph	
Street Address	Zip Code	Work Ph	Home Ph
Street Address  Last Name	Zip Code First Name		Home Ph M.J.
Street Address  Last Name  Street Address	Zip Code First Name Zip Code		Home Ph M.I. Home Ph
Street Address  Last Name  Street Address  Last Name	First Name Zip Code First Name	Work Ph	Home Ph  M.I.  Home Ph  M.I.  Home Ph  M.I.
Last Name Street Address  Last Name Street Address	Zip Code  First Name  Zip Code  First Name  Zip Code	Work Ph	Home Ph  M.I.  Home Ph  M.I.  Home Ph
Cast Name Street Address  Last Name Street Address  Last Name Street Address	Zip Code  First Name Zip Code  First Name Zip Code	Work Ph Work Ph	Home Ph  M.I.  Home Ph  M.I.  Home Ph  M.I.
Last Name Street Address  Last Name Street Address  Last Name Street Address	Zip Code  First Name Zip Code  First Name Zip Code	Work Ph Work Ph	Home Ph  M.I.  Home Ph  M.I.  Home Ph  M.I.  Home Ph
Cast Name Street Address  Last Name Street Address  Last Name Street Address  Last Name  Street Address	Zip Code  First Name Zip Code  First Name Zip Code  First Name Zip Code	Work Ph Work Ph Work Ph	Home Ph  M.I.  Home Ph  M.I.  Home Ph  M.I.  Home Ph

### Officer Involved Shooting

URN:

019-07068-2825-055

Page 4 of 6

			zbeka .		Rollout Inform	ation		- Agent Olivin Hotel				
Arrival Date	05/12/2019	Arı	rival Time 2100	Hours	Date Submitted	02/10	/2020	Date of Recomm	endation			
Employee #	Last Nar	ne		Orte	na		First Name	H	enry		М	л. М
Employee #	Last Nar	ne					First Name				М	J.
Employee #	Last Nar	ne		Gra	1		First Name	D	avid		M	Л. М.
700		ention)	diameter and	Shoot	ing / Force In	forma	tion	spanjoran ark	// Spiniary		3000	
Method			-				Type	of Injury		Body	/ Part	Injured
(BI) Baten: (BF) Bodily (CN) Canife (CR) Carotid (CH) Choke (CT) Control (TT) Control (TD) Control (CE) Chemic (OC) Chemic (TG) Chemic (EX) Explosi (FH) Fiream (FS) Fiream (FS) Fiream (FB) Fleahli (FB) Fleahli (FB) Fleahli (FB) Fleahli (FB) Fleahli	I Restraint Hold: Holds:(Control Ted I Holds:(Team Take I Holds:(Takedown) cal cal Agents (OC Sprical Agents (Tear Gal ives in (Handgun) in (Rifle) in (Other) ang	down)	(OB) Oti (OO) OU (PK) Pe (PS) Pe (PH) Pe (PS) Re (CN) Re (RS) Re (CN) Re (RH) Re (HB) Re (RE) Re (SP) Sa (SH) Sh (SG) 37 (SB) Sti (ST) Sta	her Weapo rsonal Wearsonal Wearsonal Wearsonal Wearsonal Wearsonal Wearsonal Wearsonal Townstraint Devestraint Dev	n: Blunt Object n: Other pon: Feet/Leg: (Kic pon: Feet/Leg: (Kic pon: Feet/Leg: (Sw pon (Hend/Arm) pon (Push) pon (Other) ice (Capture Net) ice (Handcuffs) ice:Hobble (Legs O ice:Hobble (TARP) ice: REACT Belt	reep)	(AB) (BR) (BU) (CP) (CO) (DH) (DI) (DB) (FR) (GS) (HB) (LC) (ND) (OD) (PA) (PW) (SD) (ST) (UN)	Abrasion Bruise Burn Comptaint of Pr Concussion Death Distocation Dog Site Fractures Gunshot Hurnan Bite Lacerations Nerve Damage Organ Damage Paralysia Puncture Wour Soft Tissue Da Sprain/Twists Unconscious	d	(AC) (AC) (BC) (CEL) (BC) (CEL) (CEL	Ankl Arm Back Butt Che Elbo Face Fing Gen Groi Han Hea Hip Inter Leg Nec	k k cocks stated to the co
(GL) Glock	n ing ir Arms Industries gton & Richardson	(IV) (JE) (LO) (LO) (MO) (NO) (NO) (RM) (RM) (RM)	Iver Johnson Jennings Lordin Luger Marlin Mossberg NCI aka SKS North American Norinco Raven Remington RG RG	(RO) (SW) (SR) (SS) (ST) (TA) (WE) (WN) (US) (YY) (XX) (ZZ)	Rossi Smith & Wesson Sturm Ruger SIG Sauer Sterling Taurus Weatherby Winchester US Government Handmade (Inmali- Homemade (Non-I		(10) 10 (12) 11 (20) 20 (21) .2 (22) .2	Refused Med T NONE 9 mm (2/0 mm (2/2 2 guage (3/4 0 guage (3/4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(i) .243 cz (ii) .25 cali (ii) .308 cz (iii) .357 cz (iii) .36 cali	(WR)	(41) (44) (45) (50) (SL)	.410 guage .44 caliber .45 caliber 50 mm Slug Other calibe

### FORCE APPLIED (one code per block)

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Pari (Code)
\$1	Ē1	UC					NN	
\$1	E1	FH	SW	38			NN	
E1	S1	FH	SS	9	Y	Y	NN	
10.81								
.,,,,,,,					-			
		011						
***								

### Officer Involved Shooting Involved Employee Information

URN: 019-07068-2825-055

									Page 5 of 6
		Manufick Land	Section 1	Involved	d Emplo	oyee	and the state of t	garan entre Fortes	and the same of th
E 1	Employee #	Last Name		Cuevas			First Na	Edga	
	Sex: M Race: H	Rank: B-1		Unit Assignme Compl	nt: ton Stat	ion	Work Assi	gnment (Unit #, Module, o Unit 28	etc.): 2D
	ShiftTime (circle only one)	ShiftType (circle only one):  Regular Overtime	Off Duty	Intoxication/Dr	rug Usage?	7 🔲	Substance	e Used:	
	Hospital Admission?	Hospital Name:		Coroner Case	1?		Coroner C	ase #	Interviewed?
	Hrs of sleep prior to shooting	g: Duty Time (bre):	Plain (	(circle only one): Clothes no Vest	Reid Jac	ket w/ Vest	Other Fac	tors: s on his first shift a	after three
		510 Weight: 210	Raid		Uniform: ✓ Uniform:			cutive regular days	s off.
	Range Qualification Date:			alification Date:				aser Training Date:	
	Certified with Weapon Used?	Patrol Certification?		ation Unit:	Weapons	Prior Shoot	ings?	Number of Prior Shootings:	Directed Force:
		Sauer Caliber 9mi	m #S	hots 3	Brand:	a suma	-		
	Field Training Officer Emp #						First Nan		M.I.
	Field Training Officer Emp :	ast Name					First Nan	ne	M.I.
Ė	Employee #	Last Name					First Na	me	M,J,
	Sex: Race:	Rank:		Unit Assignme	int:		Work Assi	gnment (Unit #, Module,	B(c.):
	ShiftTime (circle only one)	ShiftType (circle only one)		Intoxication/Dr	rug Usage?	2 🔲	Substance	e Used	
	Hospital Admission?	Hospital Name:		Coroner Case	7		Coroner (	Case #	Interviewed?
	Hrs of sleep prior to shootin  Age: Height:  Range Qualification Date:	Weight:	Plein Plein Raid	(circle only one): Clothes no Vest Clothes w/ Vest Jacket no Vest salification Date:	Reid Jed Uniform Uniform		Other Fac	aser Training Date:	
	Certified with Weapon	Patrol Certification?		ation Unit:		Prior Shoo		Number of Prior	Directed Force:
	Used?	Calibor		hots	Weapons			Shootings: Caliber	# Shots
	Brand: Field Training Officer Emp t	Last Name			Brand:		Firet Nan	ne	M.I.
	Field Training Officer Emp (	Last Name					First Nan	ne e	M.J.
E	Employee#	Last Name				"	First Na	me	M.I.
14-44-	Sex: Race:	Rank:		Unit Assignme	int:		Work Ass	ignment (Unit #, Module,	e(c,):
	ShiftTime (circle only one)	ShiftType (circle only one):   Regular   Overtime		Intoxication/D	rug Usage'	? 🔲	Substanc	e Used:	
	Hospital Admission?	Hospital Name:		Coroner Case	e?		Coroner	Case #	Interviewed?
	Hrs of sleep prior to shooting	g: Duty Time (hrs):	Plain.	(circle only one) Clothes no Vest	Raid Jak	cket w/ Vest	Other Fac	⊐ors:	
	Age: Height:	Weight:	Raid.	Clothes w/ Vest Jacket no Vest	Uniform	no Vest w/ Vest			
	Range Qualification Date:		PPC Qu	ualification Date			l l	_aser Training Date:	
	Certified with Weapon Used?	Patrol Certification?	Certific	ation Unit		Prior Sho	olings?	Number of Prior Shootings:	Directed Force:
	Wespons Fired Brand:	Caliber	# S	ihots	Weapon Brand	s Fired		Caliber	# Shots
	Field Training Officer Emp :	Last Name					First Nan	ne	M.L
	Field Training Officer Emp	Last Name	,				First Nan	ne	MJ.

### Officer Involved Shooting Suspect Information

URN: 0

019-07068-2825-055

Page 6 of 6

		S	uspect li	nformation	nazanén cehanéné	
s 1	Last Name	Morales Blas		First Name	Mario	M.I. A.
	AKA Last Name	Morales		First Name	Mario	M.I. A.
	Sex: M Race: H	Street Address		City	5	tale & Zip.Code
	Work Phone: N/A	Home Phone: N/A	Social Sec.	urity #.	Driver's License #	
	Age: 28 D.O.B. 07/30/1990	Height: 506 Weight: 220	FBI#		C##	
	Booking # 5627060	Primary Charge: Assault on a peace of	ficer, 245(	d)(1) PC Secondary Charge. Felon in posse	ssion of a firearm 2	29800(a)(1) PC
	Coroner Case?	Coroner Case #		Intoxication/Drug Usage?	Substance Used:	
	Armed?  Vehicle Make	Apprehended? ✓		Mental illness?	Criminal History?	
	Valled Histo	N/A				
s	Last Name			First Name		M,I,
	AKA Last Name			First Name		M.I.
	Sex: Race:	Street Address:		City	S	tate & Zip Code:
	Work Phone:	Home Phone:	Social Sect	urity #:	Driver's License #:	
	Age: D.O.B.	Height: Weight:	FBI#		CII#	
	Booking #	Primary Charge:		Secondary Charge:		
	Coroner Case?	Coroner Case #		Intoxication/Drug Usage?	Substance Used:	
	Armed?	Apprehended?		Mental filnesa?	Criminal History?	
	Vehicle Make			Model:	Year:	
e	Last Name			First Name		M.I.
S	Last Name			First Name		M.L.
S		Street Address:			s	
S	AKA Last Name	Street Address:	Social Sect	First Name City	S Driver's License #.	M.I.
S	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.	-	Social Sec	First Name City		M.I.
S	AKA Last Name  Sex: Race:  Work Phone	Home Phone:		First Name City	Driver's License #.	M.I.
S	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.	Home Phone:  Height: Weight:		First Name City	Driver's License #.	M.I.
S	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?	Home Phone: Height: Weight: Primary Charge:		First Name  City  unity #:  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?	Driver's License #.  Cli #  Substance Used:  Criminal History?	M.I.
S	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?	Height: Weight: Primary Charge: Coroner Case #		First Name  City  unity #:  Secondary Charge:  Intoxication/Drug Usage?	Driver's License #. Cli # Substance Used:	M.I.
S	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?	Height: Weight: Primary Charge: Coroner Case #		First Name  City  unity #:  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?	Driver's License #.  Cli #  Substance Used:  Criminal History?	M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make	Height: Weight: Primary Charge: Coroner Case #		First Name  City  unity #:  Secondary Charge:  Intoxicution/Drug Usage?  Mental Blness?  Model:	Driver's License #.  Cli #  Substance Used:  Criminal History?	M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make	Height: Weight: Primary Charge: Coroner Case #		First Name  City  unity #:  Secondary Charge:  Intoxication/Drug Usage?  Mental Bluess?  Model:	Cli #  Substance Used:  Criminal History?  Year:	M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name	Height: Weight: Primary Charge: Coroner Case # Apprehended?		City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  City	Cli #  Substance Used:  Criminal History?  Year:	M.I.  M.I.  M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:	Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?	FBI#	City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  City	Driver's License #.  Cli #  Substance Used:  Criminal History?  Year:	M.I.  M.I.  M.I.
	AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:	Home Phone: Height: Weight: Primary Charge: Coroner Case # Apprehended?  Street Address: Home Phone:	FBI #	City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  City	Driver's License #.  Cli #  Substance Used:  Criminal History?  Year:	M.I.  M.I.  M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  Age: D.Ö.B.	Home Phone: Height: Weight: Primary Charge: Coroner Case # Apprehended?  Street Address: Home Phone: Height: Weight:	FBI #	City  City  Secondary Charge:  Intoxicution/Drug Usage?  Mental Blass?  Model:  First Name  First Name  City  unity #:	Driver's License #.  Cli #  Substance Used:  Criminal History?  Year:	M.I.  M.I.  M.I.
	AKA Last Name  Sex: Race:  Work Phone  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #	Height: Weight: Primary Charge:  Coroner Case #  Apprehended?  Street Address: Home Phone: Height: Weight: Primary Charge:	FBI #	City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  Secondary Charge:	Driver's License #.  Cli #  Substance Used:  Criminal History?  Year:  Driver's License #:  Cli #	M.I.  M.I.  M.I.